

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

			wax cach violation is specified in the narrative portion of the			-	<u> </u>
Establishm				Telephone Number	Date of Inspection PERMIT # (mm/dd/yr)		PERMIT #
Pintsaunion				812 913 4647			
			mber and street, city, state, zip code)	7 211 2/22	19/25	/2019	19-227
114 E.	Mulat	54.	502 314 3627				
Owner	_			Purpose:	Follow-up Release Date		
) - Phillips				Routine	No 10 days		
Owner's A	ddress			2. Follow-up	Summary of Violations:		
				3. Complaint			
Person in C			· · · · · · · · · · · · · · · · · · ·	4. Pre-Operational	C NC Z R		
Joe Y	k://ips			_	حـــا	2 IIC	- " -
Responsible	e Person's I	E-ma	a = = = = = = = = = = = = = = = = = = =	Menu Type (See back of page)			of page)
				6. HACCP			
Certified F	ood Manag	eŗ		7. Other (list) 1 2 3 × 4 5			
)~ r	Willips	(12,	/n/23)				
• CRITICAL	ITEMS AR	E,IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative	TOLATIONS A	U IN THE N	_	
297		10				10 Be Co	rrected By
-	MC		Observed Spill on interior of bor les Observed debris/broken glass beside b	ig cooks		702	1
431	MC		Observed debris/ broken glass beside to	our 3-comp sink		T-day	<u> </u>
			· · · · · · · · · · · · · · · · · · ·				
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			Discussed Harrest Hancoming Plan	by the spray			<u> </u>
							
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